

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)**

SERIAL NO.

*#2502*

FILING DATE

*24 JAN 2000*

APPLICANT(S)

*London*

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.	<i>5</i>					
TOTAL DEP.	<i>15</i>					
TOTAL CLAIMS	<i>20</i>					

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